

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (11-07)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management Office of Pollution Prevention and Technical Assistance

100 North Senate Avenue IGCS W041 Indianapolis, IN 46204-2251 Telephone: (800) 988 -7901

FAX: (317) 233-5627 E-mail: esp@idem.IN.gov www.in.gov/idem/prevention/es.p

When to use this annual report form ...

STOP! Is your facility a member of the U.S. Environmental Protection Agency's National Environmental Performance Track and Indiana Environmental Stewardship Program? If so, please use the U.S. EPA National Environmental Performance Track Annual Performance Report form evailable at http://www.epa.gov/performancetrack/program/report.htm. The U.S. EPA will notify IDEM after receiving your annual performance report.

GO! Please use this annual report form if you are <u>only</u> a member of the Indiana Environmental Stewardship Program and <u>not</u> a member of the National Environmental Performance Track. Your Annual Performance Report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, fax, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP Program Manager at 800-988-7901.

The Indiana Environmental Stewardship Program (ESP) Annual Performance Report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. The Annual Performance Report should cover the twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. <u>Indiana ESP facilities must submit an Annual Performance Report by April 1st of every year</u>, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your Annual Performance Report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A FACILITY INFORMATION
Name of Facility
Madison Precision Products, Inc.
Name of Parent Company (If applicable)
Metts
Street Address (number and street)
94E 400N
City/State/ZiP Code
Madison, IN 47250
Facility/Company Web site
madisonprecision.com
CONTACT INFORMATION
Contact Name (Mr./Mrs./Ms./Dr.)
Dennis Welch
Tile
Environmental Manager
Telephone number
(812)273-4702, Ext. 181
FAX number
(812)273-3697
E-mail address
denniswelch@madisonprecision.com
Malling Address (if different from facility address)
94E 400N
City/State/ZIP Code
Madison, IN 47250
Reporting Period Date's
2008-2009
If this is your third Annual Performance Report, do you wish to renew your Indiana Environmental Stewardship Program membership?
YesIf yes, please complete all sections of this annual report
□ Noif no, you can skip Section D of this annual report.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual perfor mance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities? If so, please list them in the space below.
Changes of additions to your facility's list of products of additities? It so, please list die in in the space delow. ☐ Yes ☒ No
topic 1 == topic 1:-

SECTION B ENVIRONMENTAL MANAGE	MENT SYSTEM ASSESS	
Why do we need this information? IDEM needs information on the performance and assessment	F	What do you need to dio? Pease summarize your facility's EMS assessments.
activities of your Environmental Management System (EMS). 1. Is your facility currently registered to a recognized third-party EMS		Attach additional sheets as necessary
standard?	Year: 2008	
 ∑ Yes a. If yes, when was an EMS audit or other assessment last 	Type: ISO 1406	าเ
conducted by an independent third party at your facility?		ture of Aluminum Die Casting and
Please provide the type (e.g., ISO 14001 certification), scope, and month of the last assessment.	L SICODE:	ng for the Automotive Industry
□No	Month: June	ig for the Automotive industry
b. If no, when was an internal or corporate EMS audit last conducted at your facility? Please provide the scope and	monar. June	
month of the last assessment.	Year:	
	Scope:	
	Month:	
 When did your facility last conduct an internal or corporate compliance audit? Please provide the scope and month(s) of each 	Year: 2008	
audit, and indicate who conducted the audit(s) (e.g., facility staff, corporate groups, third party). Do not include audits, inspections, or	Scope: To ensur establish	e MPP conforms to all areas of the
site visits by regulatory organizations.	Month(s): Decembe	1
	Who: Laura W	1
3. (Optional) Please describe any other audits that were conducted at		
your facility. 4. Has your facility corrected all instances of potential non-compliance	Competency sign	off for one furnace associate on
and EMS non-conformance identified during your audits and other assessments?		M-0476, Cleaning of the Melt Furnace
⊠ Yes	was missing.	or the West Lumine
 a. If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS assessment(s) or compliance audit(s). 	www.iiidoiiig.	
□No		
b. If no, please explain your plans to correct these instances.		
☐ No such instances identified.		
Explain the emergencies experienced within the facility during the past year. Were the applicable emergency and contingency plans detailed in the EMS effective? What changes, if any, have been made to your facility's emergency or contingency plans?	None	<u></u>
6. When was the last Senior Management review of your EMS	Month/Year: 6/2007	
completed?	Who headed the review?	Name and Title: Dennis Welch, EMS
	Manager	,
7. When did your facility last conduct a systematic identification or review of your environmental aspects?	Month/Year: 11/2008	
(Optional) Please provide a narrative summary of progress made toward EMS objectives and targets other than those reported as an Environmental Performance Initiative in the following section. You	Environmental Aspect	Progress Made This Year (e.g., quantitative or qualitative improvements, activities conducted)
may limit the summary to environmental aspects that are significant and towards which progress has been made during the last calendar	Ink Cartridge Recy	ycling MPP donated 568 ink
year. Attach additional sheets as necessary.		cartridges to Soutwestern
		Elementary School in
		2008.
	Wastewater	MPP reduced the amount
		of wastewater generated
		by 211,220 gallons
		between 2007 and 2008.
	Office Paper Use	MPP reduced office paper
		use by over 1600 lbs.
		between 2007 and 2008.

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SECTION C	FNVIRONMENTAL	IMPROVEMENT INITIATIVE	RESULTS	
Why do we need this information'		ę		What do you need to do?
Facilities need to share the results o intorpyoment indiative that was purs			te the following table to summar z ts compared to your ESP environ	
Category: Nonhazardous V	Vaste Generation			
Aspect: Total Solid Waste				
Specific Information on Aspect (optk	'''''''''''''''''''''''''''''''''''''	al solid waste due to	recycling	
	Baseline	Progress during year 2008	Environmental improvement initiative Goal	Cost Savings (if applicable)
Actual Quantity (per year)	174.51	145.49	170	\$65,000 in
Measurement Unit	Tons	Tons	Tons	savings due to
Normalized Quantity (per year)				recycling.
Basis for your Normalizing Factor (e.g., gallons of paint produced) Briefly describe how you achieved in MPP continues to find notons of cardboard, steel,	ew waste streams to plastic, aluminum c	isolate and either reans, paper, copper,	euse or recycle. MPP	•
light bulbs in 2008 for a	savings of almost \$6	5,000.		
Please list any state, EPA, or other p EPA Performance Track			g., Energy Star, Project XL).	
(Optional) if your facility has experie those results here.	nced continued results for envi	ronmental improvement initiat	ives pursued in past years of ESI	o membership, please share
		9		
Why do we need this information? Facilities need to demonstrate their impreving environmental performance. For ESP membership, you must ident the application and the remaining will questions. Choose an indicator from Performance Indicator Table is proviselect for your Initiative should be refervironmental impact in your EMS, sure how your objectives and targets IDEM at 800-988-7901.	contributed to to to thify three (3) environmental im Il be identified each year in the the Environmental Performan ded with the ESP Application a lated to the objectives and targ No more than two of your indice	annual report. Identify the ne ce Indicator Table to measure and is also available at http://w ets in your EMS. Where poss ators can be from the same e	Reter to the land 3-year membership term. One (ow initiative that will begin this year the identified environmental initiative. Indicators should also be idenvironmental category during the	or by answering the following ative. The Environmental able doc. The indicator you entified as having a significant 3-year term. If you are not
Please complete the following questi information is required for air, hazard				ce Indicator Table. Additional
1a What category have you selected please turn to Appendix 1 to co			ry is Energy Use, Waste, or Air E ave selected.) Energy Use	missions for Total GHGs,
1b What indicator have you selected	from the Environmental Perfor	mance Table? Electricity	/	
1c All measurements should represe focus your initiative on a specific waste component). Does your initiative on a specific waste component (e.g., e.g.) All	subset of the indicator (e.g., a sitiative include everything clove	specific material, process, VO	C, group of toxic air emissions, o	r particular
If your initiative is specific to a swaste component). 10 % red			our indicator (e.g., specific chem	ical to be reduced, specific
16 What activities or process chang line, employee training)? Insta and interlink air compresso	ll egress lighting, sense	•	ur initiative (e.g., technology char s, auto off on conveyors,	* .
2a Does this initiative address a sign ☑ Yes ☐ No	ificant aspect in your EMS?			

2b If no, please explain why you believe this indicator should be included as an environmental improvement initiative.
Stop! If the cetegory listed in Question 1a is Energy Use, Waste, or Air Emissions for Total GHGs, please skip Questions 3a – 3b below and turn to Appendix 1 to complete the questions pertaining to the category you listed. After completing Appendix 1, return to question 4 and complete the remaining questions regarding your facility's environmental improvement initiative.
3a What units are you using to quantify this indicator? (Please refer to the Environmental Performance Indicator Table for the acceptable units for each indicator.)
3b List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year. Baseline quantity Year Future year quantity (not including production) Year
4 Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal? ☐ Normalized goal (i.e., indexed to level of bu siness in baseline year) ☑ Absolute goal (i.e., demonstrates improvement even if production increases)
5 Whether your goal is absolute or normalized, you will need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only). Pounds of aluminum melted per kWh of electricity used
6a Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator? ☐ Yes ☑ No
66 If yes, explain how your initiative ex ceeds regulatory requirem ents.
Why do we need this information? Describe how the facility has shared and plans formation was shared with the peolic. Please briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to report publicly on its environmental performance. Feel free, but not obligated, to attach supporting materials (e.g., meeting agendas, public announcements). Monthly attendance at the Madison Area Safety and Environmental Roundtable meeting. MPP joined the Environmental Stewardship program in 2008 and was featured in the Madison Courier in January, 2008. We also belong to the EPA WasteWise and Performance Track programs and feature their logos on our website.
Please indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as many as appropriate.
☑ Website (http://www.madisonprecision.com)
☐ Open House
Meetings Meetings
⊠ Press Releases
⊠ Community Advisory Panel
☐ Other
SECTION F ADDITIONAL INFORMATION
Why do we need this information? This information will not DEM to offectively manage the Environmental Stewardship Program. What do you need to do? Answer the questions as completely as possible Environmental Stewardship Program.
 In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months (include information about each particular program).
EPA WasteWise, EPA Performance Track. MPP won the 2004 Governors Award for
Environmental Excellence for Recycling

2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.

No

3. If your facility was not registered to the ISO 14001 standard prior to be coming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?

MPP has been registered since December, 2000

- 4. Explain the measured or perceived results from receiving, documenting, and responding to external communication.

 MPP has become an environmental leader in the community.
- 5. How have community residents and business es reacted to your facility participating in the Indiana Environmental Stewardship Program?

 It is discussed regularly at the Madison Area Safety and Environmental Roundtable meeting.
- 6. According to the measurement program developed and implemented by your facility to measure Environmental Management System success, is your facility's EMS successful? Why or why not? If not, what changes will be made to ensure continual environmental improvement and future EMS success?

MPP is successful and will continue to seek out new waste streams and environmental performance indicators to address.

CERTIFICATION AND PLEDGE

On behalf of Madison Precision Products, Inc. (name of facility),

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reas onable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, Madison Precision Products, Inc., commit to maintaining the principles and goal s outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulation s promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the Information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature Suthertand

Senior Facilities Manager

Date (month, day, year) March 17, 2009

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00 IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov aditional questions for environmental improvement initiatives for the following dategories/indicators:

Energy Use -	Non-Transpo	rtation

In the table below, please enter the amount of energy that you currently use and that you intend to use in your future reporting year. Break the energy use down by fuel type. Please note that you need only complete those lines that are relevant to your facility. If all of your energy is purchased from a local electricity generator, you may only need to complete the first line. If the facility uses natural gas, please be sure to complete the appropriate line (natural gas is typically combusted on site so it is listed in the "onsite" section).

Please note that this table categorizes sources of energy according to where the energy is generated.

3а	is the goal of your energy us a commitment to:
	Reduce total energy use
	Invest in renewable energy sources
	Combination of both strategies

35 How much energy of each type does your facility use?

		Baseline Year 2008	Future Year 2009	Units
Energy	Electricity	21,417,164	19,275,448	kWh
Generated Off-Site	Steam			
	Total Energy Generated Off-Site			
and have been a hard a man in heart and with the the total	Coal	weepennobenstry-bennot-prosite/prosite		
	Natural Gas	147,977	133,179	Deka Therms
	Crude Oil			
	Fuel Oil	The second secon		
	Diesel			
	Propane / LPG	details to the section of the sectio		
	Gasoline			to a more than the second seco
Sources of	Hydrogen Powered Fuel Cells	\$ \$100 - 100		***************************************
Energy Generated	Natural Gas / Methane Powered Fuel Celis	-		
On-Site	Biomass			
01. 0	Solar			
	Wind			
	Landfill Gas			
	Geothermal			
	Hydroelectric			
	Tire Derived Fuel Other Fuel or Source			
	Specify:			
	Total Energy Generated On-Site	desired ministration by the first property of the second of the second s		
Total Renew	able Energy Use		The said feel feel and the said of the sai	
Total Non-R	enewable Energy Use			
Total Energy	/ Use			
	of CO2 Equivalents			
	of CO2 Equivalents	Print his 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		***************************************
	hrough Purchases of Electricity			
		**************************************		A September Sept.
	able Off-Site Sources ons of CO2 Equivalents			

aste - Non-Hazardous Waste Generation the table below, please enter your facility's amou nounts you manage currently and that you intend oduct nor product packaging.	unt of non-hazardous waste, broken dow to manage in you'r future reporting year	n by waste management method. "Waste" is defined as all material	Please enter both the s sent off-site that are neitl	
Is the goal of your non-hazardous waste comm Reduce non-hazardous waste Improve waste management methods Combination of both strategles	nitment to:			
How much of your waste is handled using each	management method?			
Method of Waste Managed	Baseline Year	Future Year 2009	Units	
Landfil			Tons	
	145.49	138.22	TOHS	
Incineration				
Reused/recycled off-site	669.00	636.00	Tons	
Other management - Specify:				
Total Non-Hazardous Waste				
Combination of both strategies 3b How much of your hazardous waste is handled using eac h management method?				
How much of your hazardous waste is handled				
How much of your hazardous waste is handled Method of Waste Managed	d using eac h management method? Baseline Year 20	Future Year 20	Units	
	Baseline Year		Units	
Method of Waste Managed Landfill Incineration	Baseline Year		Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site	Baseline Year		Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site	Baseline Year		Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site Other management	Baseline Year		Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site	Baseline Year		Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site Other management Spacify:	Baseline Year	20	Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site Other management Spacify:	Baseline Year 20	20	Units	
Method of Waste Managed Landfill Incineration Reused/recycled off-site Treated on-site Other management Specify:	Baseline Year 20	20	Units	

	r Emissions – Total GHGs Is the goal of your Total GHGs commitment to: Reduce energy use Reduce process-related emissions Combination of both strategies	
37)	How much greenhouse gas does your facility emit from each source?	4

	Source	Baseline Year 20	Future Year	Units
	Stationary Combustion			
	Mobile Sources			
	Refrigeration/AC Equipment Use		·	
	Process/Fugitive		· · · · · · · · · · · · · · · · · · ·	
	Specify Source:			
Direct	Process/Fugitive			
Emissions	Specify Source:			
	Process/Fugitive			
	Specify Source:			
	Total Direct Emissions			
	Process/Fugitive			
	Purchased Electricity			
Indirect	Purchased Steam			
Emissions	Purchased Hot Water			
	Total Indirect Emissions		_	
	Other			
	Specify Source:	•		
Optional	Other			
Indirect	Specify Source:			
Emissions	Other			
	Specify Source:			
·····	Total Optional Indirect Emissions			
	Offsets			
	Specify Source:			
	Specify Source:			
Offsets	Offsets			
	Specify Source:			
	Total Reductions from Offsets	•		
	Total Emissions Léss Offsets			
	Total CFC Total HCFC			
	Total Stationary Combustion –		<u> </u>	
Complement of the	Biomass CO2		- Independent of the Control of the	
Supplemental Information	Total Mobile Sources – Biomass	····	-	
anomidaen	CO2			
	Electricity trading transactions-			
	Electricity Purchase for Resale			

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